

**U.S. Department of Justice
United States Marshals Service**

**PROCESS RECEIPT AND RETURN
DISTRICT OF CONNECTICUT**

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER CR No. 05-30019-MAP
DEFENDANT JUAN PAGAN		RECEIVER UNITED STATES MARSHAL
SERVE AT	\$10,010.00 in U.S. Currency	2008 MAR 20 AM 9 51 DISTRICT OF CONNECTICUT
ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)		2008 MAR 17 U.S. MARSHAL'S SERVICE RECEIVED BOSTON, MASS.
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW.		
Kristina E. Barclay, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210		Number of process to be served with this Form - 285
		Number of parties to be served in this case
		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please dispose of the above-named currency in accordance with the attached Final Order of Forfeiture and applicable law.

CATS No. 05-DEA-469998

LJT x3283

Signature of Attorney or other Originator requesting service on behalf of :	<input checked="" type="checkbox"/> PLAINTIFF <i>Kristina E. Barclay/LJT</i>	TELEPHONE NUMBER (617) 748-3100	DATE March 12, 2008
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>38</u>	District to Serve No. <u>14</u>	Signature of Authorized USMS Deputy or Clerk <i>Mary J. Meyer</i>	Date <u>3/17/08</u>
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (If not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode
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Address (complete only if different than shown above)	Date of Service <u>3/20/08</u>	Time <u>1135</u> <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
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Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or Deputy	Amount of Refund
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REMARKS: